PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

06/

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

| | | | or <u>Fax</u> | (703) 746-4000 | | |
|---|--|---|---|---|---|--|
| INSTRUCTIONS: This tor appropriate. All further cor indicated unless corrected in maintenance fee notification | perow or directed officialize | amitting the ISSUI Patent, advance ord in Block 1, by (a) | E FEP and PUBLIC ders and notification specifying a new c | CATION FEE (if red of maintenance fees correspondence address | uired). Blocks I through 5 s will be mailed to the current si; and/or (b) indicating a sepa | hould be completed where correspondence address as arate "FEE ADDRESS" for |
| CURRENT CORRESPONDENCE | any change of address) | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must | | | |
| 000466 75 | 590 03/31/2005 | | IPA | have its own certification | nat paper, such as all assignmente of mailing or transmission. | ent of format drawing, must |
| YOUNG & THOMPSON | | | ,, e ? | | Certificate of Mailing or Transmission | |
| 745 SOUTH 23RD STREET | | | ~ . Š/ | I hereby certify that States Postal Service | this Fee(s) Transmittal is being with sufficient postage for final Stop ISSUE FEE address | ig deposited with the United ist class mail in an envelope |
| 2ND FLOOR | | IUL } | 1 2 1 2005 3 | addressed to the M | ail Stop ISSUE FEE address SPTO (703) 746-4000, on the | above, or being facsimile |
| ARLINGTON, VA 23/2005 NBEYENE2 0000 | X 22202 1 0008 10626541 | P | | dansinited to the O. | 51 10 (70.3) 740 4000; 63 830 | (Depositor's name) |
| FC:1501 1400.00 8P FC:1504 300.00 0P | | TRADENARY | | | | (Signatore) |
| | | | | · (Date) | | |
| APPLICATION NO. | FILING DATE | | FIRST NAMED INVE | NTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 10/626.541 | 10/626.541 07/25/2003 Bj | | Bjorn T. Langela | nd | 3657-1014 1166 | |
| TITLE OF INVENTION: C | COMPOSITION FOR STIMU | LATION OF SPE | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FI | EE P | UBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1400 |) | \$300 | \$1700 | 06/30/2005 |
| EXAMINER | | ART UN | it C | CLASS-SUBCLASS | | |
| TATE, CHRISTOPHER ROBIN | | 1654 | | 424-728000 | | |
| I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |
| 3. ASSIGNEE NAME ANI | D RESIDENCE DATA TO E | E PRINTED ON T | THE PATENT (print | or type) | | |
| DI PACE NOVEE, Halan | s an assignee is identified b n 37 CFR 3.11. Completion | clow, no assignce of this form is NO | data will appear on T a substitute for fili | the patent. If an assignment. | ignee is identified below, the | document has been filed for |
| (A) NAME OF ASSIGN | NEE | (E | B) RESIDENCE: (CI | TY and STATE OR C | OGNTRY) | |
| | e assignee category or category | | | | Corporation or other private g | roup entity Government |
| 4a. The following fee(s) are | e enclosed: | . 46 | b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. | | | |
| X Issue Fee | 11 11 11 11 | . 35 | Payment by credit card. Form PTO-2038 is attached. | | | |
| Publication Fee (No small entity discount permitted) Advance Order - # of Copies | | | The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 25-0120 (enclose an extra copy of this form). | | | |
| Advance Order - # c | of Copies | | Deposit Account N | | | copy of this form). |
| 5. Change in Entity Statu | s (from status indicated abov | e) | | (if neces | | |
| a. Applicant claims S | SMALL ENTITY status. See | 37 CFR 1.27. | | | IALL ENTITY status. See 37 | |
| The Director of the USPIC NOTE: The Issue Fee and interest as shown by the red | O is requested to apply the Iss Publication Fee (if required) cords of the United States Par | ue Fee and Publica will not be accepte ent and Trademark | ntion Fee (if any) or t d from anyone other c Office. | to re-apply any previo | usly paid issue fee to the appli- registered attorney or agent; or | cation identified above. the assignee or other party it |
| Authorized Signature | Benoît C | | | Date | June 21, 2005 | |
| Typed or printed name | | | Registrat | ion No. <u>#35,041</u> | | |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.